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## POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO I hereby revoke all previous powers of attorney given in the application identified in the attached statement under

37 CFR 3.73(b).						
I hereby appoint:		٣				
Practitioners associated	d with the Customer Numb	er: :	22913			
OR						
Practitioner(s) named below (if more then ten practitioners are to be named, then a customer number must be used):						
General						
Name		Registri		Nam	e	Registration Number
					***************************************	
				***************************************		
with any and all patient applications are all patients attached to this for Please change the correspon   The address associated  OR  Firm or  Individual Name  Address  City  Country	orm in accordance with 37	CFR 3.7 olication I	3(b).			
Telephone		Emel				
Assignee Name and Address:  ELET SYSTEMS L.L.C.  2711 Centerful Road, Suite 400  Wilmington, DE 19898  A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.  SIGNATURE of Assignee of Record						
The individual veloce signature and title is smalled below is authorized to act on behalf of the assigned						

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 36 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this hurdurn, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460

Durallari

Authorized Person for Elet Systems L.L.C.

Dana Morris

Signature

Name

## DECLARATION REGARDING AUTHORITY TO SIGN ON BEHALF OF A LEGAL ENTITY 37 C.F.R. 3.73(b)(2)(ii)

I, Dana Morris (whose title is supplied below), hereby declare that I am authorized to sign on behalf of Elet Systems L.L.C.

Dana Morris, Authorized Person for Elet Systems L.L.C. 8/12/09

Date